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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: Customer Numb or Bar Code Lab			OR 🔀 Co	prrespondence address below					
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city starling heights		State Milig		ZIP 48310					
Country USA Te	City string heights  State Milipan ZIP 483/0  Lebenon (361-923-5443)  Telephone 8/0-825-2340(USA) Fax								
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:	A petition h	as been fil	ed for this un	signed inventor					
Given Name (first and middle [if any]) Hanna Allert Family Name or Surname									
Inventor's Signature	A ACCEPTAGE OF THE PROPERTY OF								
Residence: City Sterling hights	State Michi	ean Cour	ntry USA	Citizenship Jelanese					
Mailing Address									
City sterling heights	State Michig	an ZIP	48310	Country USA					
NAME OF SECOND INVENTOR:	A petition has	been filed	for this unsi	gned inventor					
Given Name (first and middle [if any])									
Inventor's Signature				Date					
Residence: City	State	Country	у	Citizenship					
Mailing Address									
City	State	ZIP		Country					
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.									

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DECLARATION FOR LITH ITY OR			Attorney Docket Number		
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		First Named Inventor	Hanna	Mbert Awad	
		COMPLETE IF KNOWN			
	(37 CFR 1.63)		Application Number		
	X Declaration	Declaration	Filing Date		
	Gubillittou		Group Art Unit		
			Examiner Name		

			•						
As a below named inventor, I he	As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Sink energy, generation, computers on three digit (0,1,2), operation of machinery.									
	/Title of	the Invention							
the specification of which	(Title or i	the Invention)							
the specification of which  is attached hereto									
or  was filed on (MM/DD/YYYY)  as United States Application Number or PCT International									
	L								
Application Number	and was	amended on (MM/DD/YY	YY)	(if applicable).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					
Additional foreign application	numbers are listed on a	Supplemental priority da	ta sheet DTO/SP	MOR attached hereta:					

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[Page 1 of 2]

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